Exhibit D p. 1 of 11

MEDICAL HISTORY AND PHYSICAL EXAM FINDINGS BASED ON BOP HEALTH SERVICES MEDICAL RECORDS:

BOP Health Services medical record encounter with medical staff dated 03/20/2022 at 12:41. Provider of medical evaluation and treatment - Ashley Swineford, Paramedic, who was supervised by physician, Dr. Michael Moclock, M.D. Inmate examed and treated - Lynch, Michael David, who's date of birth is 02/11/1971. and is an inmate in the BOP system.

Comments based on the Exam Comments on the BOP Health Services medical record:

The inmate, Michael David Lynch, was being held in the SHU - Special Housing Unit, and per the record, was assaulted by a fellow inmate He was punched on the right side of his head, and left side of the body pushed up against the wall. There is no record of any officer coming to Mr. Lynch's aid during this assault by the paramedic, Ashley Swineford's medical record entry.

Mr. Lynch likely suffered unconsciousness, since he is "unsure" and describes seeing "stars", as he tried to protect himself with a bed sheet, which would offer no protection from an assault. On physical examination, Mr. Lynch was "emotionally in distress", per Ms. Ashley Swineford, and according to the medical record, did not consult or have Dr. Michael Moclock evaluate the patient. The standard of care, would require for either the doctor or a specialist in Neurology, to evaluate a closed head injury, to rule out a subdural hematoma or other potentially life threatening medical condition.

The medical report goes on to describe blood on Mr. Lynch's face and neck with a laceration on the left side of his head, measuring 1 cm in length, and a 4 cm hematoma around the laceration. sutures were deemed necessary nor were steri-strips applied to the superficial laceration, not even a bandaid? The paramedic, Ms. Swineford, palpated the hematoma, but did not order any X-rays or consider a MRI or CT scan of the head.

Mr. Lynch, also complained of pain on his right leg, a prior medical issue, and cannot rule out that this assault may have exacerbated the existing injury.

The patient, Lynch, was instructed to follow up with sick call or notify the officers, if there was any change in his condition. ever, you would think, that on this type of assault with injuries, the standard of care, would include some sort of follow-up the following day. Mr. Lynch is not a trained medical person, and would not necessarily know, if the symptoms he would be experiencing post-trauma, are of a serious nature and could warrant further medical evaluation or studies.

MEDICAL HISTORY AND PHYSICAL EXAM dated 03/20/2022, the day of the assault - Continued:

Since the assault, Mr. Lynch has suffered an increase in the intensity and frequency of headaches, which staff doctor(s) have dismissed as Migraine Headaches, but he has never had a MRI or CT of his head to rule out any other type of pathology. He definitely exhibits signs and symptoms of post-concussion syndrome, which could last for years.

Since the assault, his blood pressure has had a tendency to rise, and in addition to Essential Hypertension, could be suffering from stress induced hypertension of a post-traumatic nature.

Mr. Lynch has since the assault, also suffered nightmares, difficulty sleeping at times as he relives the horrible experience of being assaulted in a small cell with no aid provided by officers in the S.H.U., which is suppose to have officer's monitoring inmates round the clock. His symptoms are consistent with Post Traumatic Stress Disorder (PTSD). The BOP has offered no assistance or counseling on this matter. The only counseling he received was from paramedic Ms. Swineford, which is not a trained counselor nor Psychologist.

The BOP Health Services record also notes Mr. Lynch's complaint of eye pain. This was attributed to OC exposure by paramedic Swineford, and in her physical exam findings, noted an increase in the patient's blood pressure and pulse (120 per minute), the latter of which is tachycardia. A cardiologist was not consulted, nor was Dr. Moclock, her supervising physician. He also had an abnormal respiratory rate of 28 with 95% oxygen saturation. Mr. Lynch is known to have been diagnosed as having Asthma and Chronic Obstructive Pulmonary Disease. Stress has been known to trigger an asthma attack, which is not a benign condition, and could lead to respiratory failure and/or death!

After exposure to OC by the officer, Mr. Lynch was decontaminated, but complained of eye irritation, with burning in the eyes, nose, and throat with trouble breathing. No inhaler with a brochodilator was administered nor a nebulizer breathing treatment given to this inmate who is known to have two serious pulmonary diseases - Asthma and COPD! A O-2 saturation of 95% on room air is not normal?!

In the paramedic's assessment on encounter dated 04/14/22, there is no mention of Mr. Lynch's pulmonary diseases, nor his PTSD, nor his continued headaches and no tests were ordered.

Mr. Lynch is an inmate in FCI Big Spring, and continues to have headaches and respiratory issues, of which OC exacerbation cannot be ruled out. He also continues to suffer from nightmares from the assault and PTSD symptomalogy, which has not been addressed. He has had no X-rays of his head, nor a MRI/CT of his head. He continues to have high blood pressure, uncontrolled and respiratory issues.

p. 3 of 11

MEDICAL HISTORY AND PHYSICAL EXAM FINDINGS BASED ON BOP HEALTH SERVICES MEDICAL RECORDS:

Conclusion on Medical History & Physical (continued):

As a Pro Se inmate, I am not an attorney, nor do I have any legal training. But, I believe, to the lay person, the type of treatment I received in a prison operated by Warden Thomson and his staff, is unacceptable. And, the treatment I received from Health Services at his facility is not becoming of the standard of care recommended by the American Medical Association, including treatment under the supervision of a Medical Doctor. No where does Dr. Michael Moclock make any comments on my condition, does not recommend X-rays, MRI/CT Scan of the head, nor does he comment on my elevated blood pressure, increased heart rate, increased respiratory rate at rest, or the oxygen saturation on room air (which is 99-100% in a normal person on room air). Dr. Moclock does not recommend any psychological evaluation to evaluate the Post Traumatic Stress Disorder, that developed, nor was it ever identified.

Ask me, if there is any monetary amount that would make these medical and emotional disorders go away or acceptable, and my answer would be no! Who would have their health placed in danger and end up experiencing future complications, just to get a buck?

However, our system of justice and fairness for an individual who finds themselves in this precarious situation, must now resort to having the judicial system place some kind of punishment on the Warden and her staff, in order to show some degree of remorse, and pernaps cause them to reflect on their intolerance and prejudicial behavior that violated my constitutional rights, despite being incarcerated. I am still human.

I do believe that the judge and/or jury, would be fair in making a monetary determination for the suffering I have endured.

I am remorseful for the crime I committed, and have had time to reflect on my error. I believe in God, and have asked His forgiveness, and because I classify myself as a "born again" Christian, I have learned to forgive those that have harmed and persecuted me, even prior to my incarceration.

I continue to seek help for my physical, emotional, and medical conditions at FCI Big Spring, but here too, have run across intolerance and biased staff members.

p. 4 of 11

MEDICAL HISTORY AND PHYSICAL EXAM FINDINGS BASED ON BOP HEALTH SERVICES MEDICAL RECORDS:

Conclusion on Medical History & Physical:

It would be obvious to even a non-medical person, that Mr. Lynch has suffered physical and mental injuries/conditions due to the assault he suffered.

It would also be apparent, that he continues to suffer the ramifications of the assault to this day, and will likely have a permanent mental affect on him.

The physical ramifications cannot be dispensed, since he has not had a proper workup of his headaches nor was he ever evaluated properly per medical standards at the time of the incident.

It is unfortunate, that Mr. Lynch had to suffer such trauma, since he was being housed in a special unit, with purportedly trained officers on duty, and where 24 monitoring of inmates occurs. This is obviously not the operational protocol at the facility where this incident occurred, and does require some sort of investigation to insure inmates are in safe environments.

Mr. Lynch is currently being incarcerated for violation of a federal crime. His freedom has been taken away, as well as, other rights, such as voting. This is the form of punishment the United States federal government currently handles certain infractions of the law, including at times, ordering monetary judgements.

What the system of federal incarceration does not use and is not permitted to use, is the tolerance of an environment that places an inmate in eminent danger to his health or life; And that allows and utilizes other inmates to inflict physical punishment because of personal biases and/or prejudices.

As they say, accountability begins at the top, and Warden Thomson and the other defendants listed (which should also include those that did not provide a standard of medical treatment and evaluation), are responsible for placing Mr. Lynch in a hostile environment, knowing and/or increasing the probability that he would succumb to mental and physical harm by an intolerant inmate.

Case 1:23-cv-01167-KMN-LT Document 34-4 Filed 09/20/24 Page 5 of 11 p. 5 of 11

MEDICAL HISTORY AND PHYSICAL EXAM FINDINGS BASED ON BOP HEALTH SERVICES MEDICAL RECORDS:

I declare under the penalty of perjury that the foregoing is true and correct.

Respectfully submitted on:

09-13-2024.

Michael David Lynch Fed. No. 76039-004 FCI Big Spring 1900 Simler Ave.

Big Spring, Texas 79720

Case 1:23-cv-01167-KMN-LT Document 34-4 Filed 09/20/24 Page 6 of 11

Immate Name: LYNCH, MICHAEL DAVID

6 of 11

Rea#: 76039-004

Date of Birth:

02/11/1971

Sex:

Race: WHITE

Facility: ALF

Encouriter Date: 04/14/2022 14:33

Provider: Swineford, Ashlev

Unit: Z02

Head

General

Yes: Symmetry of Motor Function, Atraumatic/Normocephalic

Eyes

General

Yes: PERRLA

Periorbital/Orbital/Lids

Yes: Normal Appearing

Pupils

Yes: Normal Appearing, PERRLA

Face

General

Yes: Symmetric

No: Trauma

Mouth

General

Yes: Within Normal Limits

Pharvnx

Yes: Within Normal Limits

Neck

General

Yes: Within Normal Limits, Supple

Pulmonary

Observation/Inspection

Yes: Within Normal Limits, Tachypnea

No: Stridor, Retractions, Nasal Flaring

Auscultation

Yes: Clear to Auscultation

No: Crackles, Rhonchi, Wheezing, Diminished Breath Sounds

Abdomen

Inspection

Yes: Within Normal Limits

Comments

Inmate was examined after exposure to OC. Inmate was removed from the holding cell and taken to a decontamination area. Inmate's clothing was cut off due to OC exposure and he was decontaminated with copious amounts of water. During and after decontamination a visual search was conducted and no injuries other than OC exposure were noted. Blood pressure and heart rate were slightly elevated, but was expected due to the situation. The inmate continued to complain of his face burning, however he was decontaminated with copious amounts of water and placed in a cell with running water available if needed.

Exam Comments

Inmate complained of burning in the eyes, nose, and throat along with trouble breathing.

Eyes appeared red and irritated, however pupils were normal and reactive.

No signs of swelling were found in the nose or throat area.

Lung sounds were auscultated and found to be clear and equal bilaterally, oxygen saturation found to be within normal limits.

Remainder of examination unremarkable with no injuries noted.

Generated 04/14/2022 14:54 by Swineford, Ashley Paramedic

Bureau of Prisons - ALF

Case 1:23-cv-01167-KMN-LTB և բջգլյությութ 3/4s 4 ո sFiled 09/20/24 Page 7 of 11 p. 7 of 11 Health Services

Clinical Encounter

Inmate Name: LYNCH, MICHAEL DAVID

02/11/1971 Date of Birth:

Encounter Date: 04/14/2022 14:33

Sex:

Race: WHITE

Provider: Swineford, Ashley

Reg #:

76039-004

Facility: ALF Unit: Z02

Injury Assessment - Non-work related encounter performed at Special Housing Unit.

SUBJECTIVE:

INJURY 1

Provider: Swineford, Ashley Paramedic

04/14/2022 13:25

Date Reported for Treatment:

04/14/2022 13:35

Date of Injury: Work Related:

Work Assignment:

SHU/AD

Pain Location:

Eyes-bilateral

Pain Scale:

10

Pain Qualities: Burning

Where Did Injury Happen (Be specific as to location):

SHU, Range 2 Cell 216

Cause of Injury (Inmate's Statement of how injury occurred):

"He sprayed me"

Symptoms (as reported by inmate):

"My eyes burn and I can't keep them open, my chest and throat hurt."

OBJECTIVE:

Pulse:

Date

Time

Rate Per Minute

Location

Rhythm

Provider

04/14/2022 13:40 ALX

120

Swineford, Ashley Paramedic

Respirations:

Date

<u>Time</u>

Rate Per Minute Provider

04/14/2022

13:40 ALX

28 Swineford, Ashley Paramedic

Blood Pressure:

Date

Time

04/14/2022 13:40 ALX

Value 140/92

Location

Position

Cuff Size

Provider

Swineford, Ashley Paramedic

Sa02:

Date

04/14/2022

<u>Time</u>

Value(%) Air

Provider

13:40 ALX

95 Room Air

Swineford, Ashley Paramedic

Exam:

General

Affect

Yes: Anxious

Appearance

Yes: Appears Distressed, Alert and Oriented x 3, Disheveled

Skin

General

Yes: Within Normal Limits

Generated 04/14/2022 14:54 by Swineford, Ashley Paramedic

Bureau of Prisons - ALF

Page 1 of 3

Case 1:23-cv-01167-KMN-LT Document Reg #:

Inmate Name: LYNCH, MICHAEL DAVID

Date of Birth: 02/11/1971

Encounter, Date: 04/14/2022 14:33

Provider: Swineford, Ashley

Facility: ALF Unit:

Z02

ASSESSMENT:

Other

Decontamination and assessment after OC exposure.

PLAN:

Disposition:

Return Immediately if Condition Worsens Notify Psychology Duty Officer Placed on Suicide Watch

Patient Education Topics:

<u>Date Initiated</u> 04/14/2022	<u>Format</u> Counseling	Handout/Topic Access to Care	<u>Provider</u> Swineford, Ashley	Outcome Verbalizes Understanding
04/14/2022	Counseling	Hand & Respiratory Hygiene	Swineford, Ashley	Verbalizes Understanding
04/14/2022	Counseling	Plan of Care	Swineford, Ashley	Verbalizes Understanding
04/14/2022	Counseling	Safety/Injury Prevention	Swineford, Ashley	Verbalizes Understanding

Copay Required: No

Cosign Required: Yes

Telephone/Verbal Order: No

Completed by Swineford, Ashley Paramedic on 04/14/2022 14:54 Requested to be cosigned by Moclock, Michael (MAT) MD. Cosign documentation will be displayed on the following page.

Case 1:23-cv-01167-KMN-LT of Doctument 34-4 Filed 09/20/24 Page 9 of 11

Health Services Cosign/Review

Inmate Name: Date of Birth:

LYNCH, MICHAEL DAVID

02/11/1971

Sex:

Μ

Reg#:

76039-004

Encounter Date: 04/14/2022 14:33

Provider:

Swineford, Ashley

Race: Facility: WHITE ALF

Cosigned by Moclock, Michael (MAT) MD on 04/15/2022 06:44.

Case 1:23-cv-01167-KMN-LT Document 34-4 Filed 09/20/24 Page 10 of 11

Inmate Name: LYNCH, MICHAEL DAVID

02/11/1971 Date of Birth:

Encountér Date: 03/20/2022 12:41

 $_{\text{Sex:}}$ 10 $_{\text{M}}$ of 11 $_{\text{Race:}}$ WHITE Provider: Swineford, Ashley

Rea#: 76039-004

Facility: ALF Z02 Unit:

Knee

Yes: Normal Exam

Tibia / Fibula

Yes: Normal Exam

Back

Yes: Normal Exam

Exam Comments

Inmate presented in SHU holding cell for injury assessment after what he stated was a physical altercation with his cellmate. Inmate states that he was standing at the door in his cell when he was "assaulted" by his cell mate. Inmate states that his cell mate began punching him in on the right side of the head and pushed the left side of his body against the wall. He is unsure if he lost consciousness, but was only able to state that he "saw stars" while he attempted to protect his face with a bed sheet.

Inmate was awake, alert, and oriented and appeared to be in emotional distress.

Blood was observed on the inmate's face and neck. The only open wound found was a small laceration on the left side of his head surrounded by a hematoma. Laceration was approximately 1 cm in length and the hematoma forming around the laceration was approximately 4 cm at the time of examination. Bleeding was stopped by the inmate prior to assessment. Scalp wound appeared to be superficial and did not require any bandaging or closure.

Inmate reported pain and tenderness on the right side of his head with palpation, stating that this is where he was "punched". Area felt to be intact with no obvious deformities.

Inmate does not present with any signs of a head injury.

Inmate stated that he was experiencing pain in his right leg. This pain is "normal" for him, but seems to be amplified at this time. He states that this is not a new injury/problem.

The remainder of the physical exam was unremarkable, with no further abnormalities or wounds found.

Inmate was informed to follow up at sick call tomorrow if needed for further care and evaluation of head. Inmate instructed to notify officers immediately if his condition changed or worsened in any way. Inmate verbally acknowledged this plan of care.

ASSESSMENT:

Hematoma

Hematoma and scalp laceration from reported "assault"

PLAN:

Disposition:

Return Immediately if Condition Worsens

Patient Education Topics:

Date Initiated Format 03/20/2022 Counseling Handout/Topic Access to Care Provider Swineford, Ashley Outcome. Verbalizes **Understanding**

03/20/2022

Counseling

Plan of Care

Swineford, Ashley

Verbalizes Understanding

Copay Required: No

Cosign Required: Yes

Telephone/Verbal Order: No

Completed by Swineford, Ashley Paramedic on 03/20/2022 13:16 Requested to be cosigned by Moclock, Michael (MAT) MD.

Cosign documentation will be displayed on the following page.

Case 1:23-cv-01167-KMN-LTB Page 11 of 11 p. 11 of 11 Health Services

Cosign/Review

Inmate Namé: LYNCH, MICHAEL DAVID

02/11/1971 Date of Birth: Encounter Date: 03/20/2022 12:41 Sex: Provider:

Swineford, Ashley

Reg#: Race:

76039-004 WHITE

Facility: ALF

Cosigned by Buschman, Brian (MAT) MD on 03/21/2022 14:16.